


 National Transportation Safety Board <b>FACTUAL REPORT</b> AVIATION		NTSB ID: DCA03WA031		Aircraft Registration Number: ZS-SAJ	
		Occurrence Date: 03/12/2003		Most Critical Injury:	
		Occurrence Type: Accident		Investigated By:	
Location/Time					
Nearest City/Place Johannesburg	State	Zip Code	Local Time	Time Zone	
Airport Proximity:		Distance From Landing Facility:		Direction From Airport:	
Aircraft Information Summary					
Aircraft Manufacturer Boeing		Model/Series 747-300F		Type of Aircraft Airplane	
Sightseeing Flight: No			Air Medical Transport Flight: No		
Narrative					
<p>Brief narrative statement of facts, conditions and circumstances pertinent to the accident/incident:</p> <p>A South African Airways Boeing 747-300F, tail number ZS-SAJ, experienced a tail strike while on take-off from Johannesburg, South Africa. The South Africa Safety Department is investigating.</p>					
FACTUAL REPORT - AVIATION					

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		Occurrence Date: 03/12/2003				
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<b>Landing Facility/Approach Information</b>						
Airport Name		Airport ID:	Airport Elevation Ft. MSL	Runway Used	Runway Length	Runway Width
Runway Surface Type:						
Runway Surface Condition:						
Type Instrument Approach:						
VFR Approach/Landing:						
<b>Aircraft Information</b>						
Aircraft Manufacturer Boeing		Model/Series 747-300F		Serial Number		
Airworthiness Certificate(s):						
Landing Gear Type:						
Homebuilt Aircraft? No	Number of Seats:	Certified Max Gross Wt. LBS		Number of Engines:		
Engine Type:	Engine Manufacturer:	Model/Series:		Rated Power:		
<b>- Aircraft Inspection Information</b>						
Type of Last Inspection	Date of Last Inspection	Time Since Last Inspection Hours		Airframe Total Time Hours		
<b>- Emergency Locator Transmitter (ELT) Information</b>						
ELT Installed?	ELT Operated?	ELT Aided in Locating Accident Site?				
<b>Owner/Operator Information</b>						
Registered Aircraft Owner		Street Address				
		City	State	Zip Code		
Operator of Aircraft		Street Address				
		City	State	Zip Code		
Operator Does Business As:			Operator Designator Code:			
<b>- Type of U.S. Certificate(s) Held: None</b>						
Air Carrier Operating Certificate(s):						
Operating Certificate:			Operator Certificate:			
Regulation Flight Conducted Under: Non-U.S., Commercial						
Type of Flight Operation Conducted: Scheduled; International; Cargo						
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<b>First Pilot Information</b>																																																																																				
Name			City		State																																																																															
Sex:	Seat Occupied:	Principal Profession:		Certificate Number:																																																																																
Certificate(s):																																																																																				
Airplane Rating(s):																																																																																				
Rotorcraft/Glider/LTA:																																																																																				
Instrument Rating(s):																																																																																				
Instructor Rating(s):																																																																																				
Type Rating/Endorsement for Accident/Incident Aircraft?																																																																																				
Current Biennial Flight Review?																																																																																				
Medical Cert.:		Medical Cert. Status:		Date of Last Medical Exam:																																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">- Flight Time Matrix</th> <th rowspan="2">All A/C</th> <th rowspan="2">This Make and Model</th> <th rowspan="2">Airplane Single Engine</th> <th rowspan="2">Airplane Multi-Engine</th> <th rowspan="2">Night</th> <th colspan="2">Instrument</th> <th rowspan="2">Rotorcraft</th> <th rowspan="2">Glider</th> <th rowspan="2">Lighter Than Air</th> </tr> <tr> <th>Actual</th> <th>Simulated</th> </tr> </thead> <tbody> <tr> <td>Total Time</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pilot In Command(PIC)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 90 Days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 30 Days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 24 Hours</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						- Flight Time Matrix	All A/C	This Make and Model	Airplane Single Engine	Airplane Multi-Engine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Actual	Simulated	Total Time											Pilot In Command(PIC)											Instructor											Last 90 Days											Last 30 Days											Last 24 Hours										
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Seatbelt Used?		Shoulder Harness Used?		Toxicology Performed?																																																																																
<b>Flight Plan/Itinerary</b>																																																																																				
Type of Flight Plan Filed:																																																																																				
Departure Point		State		Airport Identifier	Departure Time																																																																															
Destination		State		Airport Identifier																																																																																
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Type of Airspace:																																																																																				
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		Occurrence Date: 03/12/2003			
		Occurrence Type: Accident			

<b>Weather Information</b>					
WOF ID	Observation Time	Time Zone	WOF Elevation <div style="text-align: center;">Ft. MSL</div>	WOF Distance From Accident Site <div style="text-align: center;">NM</div>	Direction From Accident Site <div style="text-align: center;">Deg. Mag.</div>
Sky/Lowest Cloud Condition:			Ft. AGL	Condition of Light:	
Lowest Ceiling:			Ft. AGL	Visibility: SM	Altimeter: "Hg
Temperature: °C	Dew Point: °C	Wind Direction:		Density Altitude: Ft.	
Wind Speed:	Gusts:	Weather Conditions at Accident Site:			
Visibility (RVR): Ft.	Visibility (RVV) SM	Intensity of Precipitation:			
Restrictions to Visibility:					
Type of Precipitation:					


<b>Accident Information</b>					
Aircraft Damage: Substantial		Aircraft Fire:		Aircraft Explosion	
Classification:					
- Injury Summary Matrix	Fatal	Serious	Minor	None	TOTAL
First Pilot					
Second Pilot					
Student Pilot					
Flight Instructor					
Check Pilot					
Flight Engineer					
Cabin Attendants					
Other Crew					
Passengers					
- TOTAL ABOARD -					
Other Ground					
- GRAND TOTAL -					

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<b>Administrative Information</b>		
<b>Investigator-In-Charge (IIC)</b> Lorenda Ward		
<b>Additional Persons Participating in This Accident/Incident Investigation:</b>  Bob Drake		
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